Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. LFS-5001USA-CIP Attorney Docket No. UTILITY PATENT APPLICATION Lorin Olson, et al. First Inventor TRANSMITTAL Cap for a Dermal Tissue Title ER 542348064 US (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Mail Stop Patent Application APPLICATION ELEMENTS Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or 1. 🔽 (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. 🗹 Specification [Total Pages Computer Readable Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix Paper - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) c. Statements verifying identity of above copies - Detailed Description ACCOMPANYING APPLICATION PARTS - Claim(s)
- Abstract of the Disclosure 9. Assignment Papers (cover sheet & document(s)) 4. Drawing(s) (35 U.S.C. 113) [Total Sheets _ 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attomey 5. Oath or Declaration [Total Sheets English Translation Document (if applicable) a. Newly executed (original or copy) Chapting of Pot 1

b. Copy from a prior application (37 CFR 1.63(d)) 12. 🔽 Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations Preliminary Amendment (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) 14. (Should be specifically itemized) **DELETION OF INVENTOR(S)** Certified Copy of Priority Document(s) Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR 16. Nonpublication Request under 35 U.S.C. 122 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 6. Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation-in-part (CIP) Continuation Divisional of prior application No.: 60/426,683 Art Unit: Prior application information: Examiner -For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS \subseteq Customer Number: 27,777 OR Correspondence address below

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

State

Telephone

Registration No. (Attorney/Agent) 40,075

Zip Code

Name

Address City

Country

Signature

Name (Print/Type)

Mayumi Maeda

PTO/SB/17 (01-03)

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	fo	r FY	2003	3

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

Mayumi Maeda

Name (Print/Type)

TOTAL AMOUNT OF PAYMENT

(\$)	1	,668
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Complete if Known				
Application Number	Unassigned			
Filing Date	Unassigned			
First Named Inventor	Lorin Olson, et al.			
Examiner Name	Unassigned			
Art Unit	Unassigned			
Attorney Docket No.	LFS-5001USA-CIP			

	Attorney bocket No. El O 300 100A Oli			
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
Order	Large Entity , Small Entity			
Deposit Account:	Fee Fee Fee Fee Fee Description			
Account 10-750	Code (\$) Code (\$) 1051 130 2051 65 Surcharge - late filing fee or oath			
Number Deposit	1052 50 2052 25 Surcharge - late mining fee or			
Account Name	cover sheet			
The Commissioner is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification			
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
Charge any additional fee(s) during the pendency of this application	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after			
to the above-identified deposit account.	Examiner action			
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month			
1. BASIC FILING FEE	1252 410 2252 205 Extension for reply within second month			
Large Entity Small Entity	1253 930 2253 465 Extension for reply within third month			
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254 1,450 2254 725 Extension for reply within fourth month			
1001 750 2001 375 Utility filing fee	1255 1,970 2255 985 Extension for reply within fifth month			
1002 330 2002 165 Design filing fee	1401 320 2401 160 Notice of Appeal			
1003 520 2003 260 Plant filing fee	1402 320 2402 160 Filing a brief in support of an appeal			
1004 750 2004 375 Reissue filing fee	1403 280 2403 140 Request for oral hearing			
1005 160 2005 80 Provisional filing fee 770	1451 1,510 1451 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 770	1452 110 2452 55 Petition to revive - unavoidable			
	1453 1,300 2453 650 Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,300 2501 650 Utility issue fee (or reissue)			
Extra Claims below Fee Paid	1502 470 2502 235 Design issue fee			
Total Claims 46 -20** = 26 x 18 = 468 Independent 8 -20** = 26 x 86 -420	1503 630 2503 315 Plant issue fee			
Claims - 3" = 180 \$ 1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1460 130 1460 130 Petitions to the Commissioner			
Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity	1806 180 1806 180 Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per			
1202 18 2202 9 Claims in excess of 20	property (times number of properties) 1809 750 2809 375 Filing a submission after final rejection			
1201 84 2201 42 Independent claims in excess of 3	(37 CFR 1.129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid	1810 750 2810 375 For each additional invention to be			
1204 84 2204 42 ** Reissue independent claims over original patent	examined (37 CFR 1.129(b)) 1801 750 2801 375 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20	1802 900 1802 900 Request for expedited examination			
and over original patent	of a design application			
SUBTOTAL (2) (\$) 898	Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0			
SUBMITTED BY (Complete (if applicable)				
Name (Bistration No. 10 arr Telephone 409 056 4700				

Signature WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide cr dit card information and authorization on PTO-2038.

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(Attorney/Agent)

40.075

Telephone 408-956-4790

12/2003

Date